

CLASS V WELL PRE-CLOSURE NOTIFICATION FORM

**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF GROUND WATER AND DRINKING WATER**

1. Name of facility:_____

Address of facility:_____

City/Town:_____ State:_____ Zip Code:_____

County:_____ Location:_____

2. Name of Owner/Operator:_____

Address of Owner/Operator:_____

City/Town:_____ State:_____ Zip Code:_____

Legal contact:_____ Phone number:_____

3. Type of well(s):_____ Number of well(s):_____

4. Well construction (check all that apply):

<input type="checkbox"/> Drywell	<input type="checkbox"/> Septic tank	<input type="checkbox"/> Cesspool
<input type="checkbox"/> Improved sinkhole	<input type="checkbox"/> Drainfield/leachfield	<input type="checkbox"/> Other _____

5. Type of discharge:_____

6. Average flow (gallons/day):_____ 7. Year of well construction:_____

8. Type of well closure (check all that apply):

<input type="checkbox"/> Sample fluids/sediments	<input type="checkbox"/> Clean out well
<input type="checkbox"/> Appropriate disposal of remaining fluids/sediments	<input type="checkbox"/> Install permanent plug
<input type="checkbox"/> Remove well & any contaminated soil	<input type="checkbox"/> Conversion to other well type
<input type="checkbox"/> Other (Describe):_____	

9. Proposed date of well closure:_____

10. Name of preparer:_____ Date:_____

PAPERWORK REDUCTION ACT NOTICE

The public reporting and recordkeeping burden for this collection of information is estimated to average 1.5 hours per respondent. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Regulatory Information Division, U.S. Environmental Protection Agency (2137), 401 M St., S.W., Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

INSTRUCTIONS

You must complete this form to notify the U.S. EPA that you intend to close a Underground Injection Control (UIC) Class V well at your facility. You may complete one form for more than one of the same type of Class V well at each facility. For example, if you will be closing two drywells that are of similar construction at your facility, you may use one form.

The numbers below correspond to the numbers on the form.

1. Supply the name and street address of the facility where the Class V well(s) is located. Include the City/Town, State (U.S. Postal Service abbreviation) and Zip Code. If there is no street address for the Class V well, provide the route number or locate the well(s) on a map. If available, for the "Location" provide the Latitude/Longitude of the well or the legal description of the facility.
2. Provide the name and mailing address of the owner of the facility or if the facility is operated by lease, the operator of the facility. Include the name and phone number of the legal contact for any questions regarding the information provided.
3. Indicate the type of Class V well that you intend to close. For example, motor vehicle waste disposal well or cesspool). Provide the number of wells of this well type at your location that will be closed.
4. Mark an "x" in the appropriate box to indicate the type of well construction. Mark all that apply to your situation. For example, for a septic tank that drains into a drywell, mark both the "septic tank" and "drywell" boxes. Please provide a generalized sketch or schematic of the well construction if available.
5. List or describe the types of fluids that enter the Class V well. If available, attach a copy of the chemical analysis results and/or the Material Safety Data Sheets for the fluids that enter the well.
6. Estimate the average daily flow into the well in gallons per day.
7. Provide the year that the Class V well was constructed. If unknown, provide the length of time that your business has been at this location and using this well.
8. Mark an "x" in the appropriate box(s) to indicate briefly how the well closure is expected to proceed. Mark all that apply to your situation. For example, all boxes except the "Remove well & any contaminated soil" and "Other" would be marked if: the connection of an automotive service bay drain leading to a septic tank and drainfield will be closed, but the septic system will continue to be used for washroom waste disposal only, and the fluids and sludge throughout the system will be removed for proper disposal, the system cleaned, a cement plug placed in the service bay drain and the pipe leading to the washroom connection, and the septic tank/drainfield remains open for septic use only. In this example, the motor vehicle waste disposal well is being converted to another well type (a large capacity septic system).
9. Self explanatory.
10. Self explanatory.

The purpose of this form is to serve as the means for the Class V well owner or operator's notice to the UIC Director of their intent to close the well in accordance with Title 40 of the Code of Federal Regulations (40 CFR) Section 144.12 (a). According to 40 CFR §144.86, you must notify the UIC Program Director at least 30 days prior to well closure of you intent to close and abandon your well. Upon receipt of this form, if the Director determines that more specific information is required to be submitted to ensure that the well closure will be conducted in a manner that will protect underground sources of drinking water (as defined in 40 CFR §144.3), the Director can require the owner/operator to prepare, submit and comply with a closure plan acceptable to, and approved by the Director.

Please be advised that this form is intended to satisfy federal UIC requirements regarding pre-closure notification only. Other state, tribal or local requirements may also apply.